

Application Data Sheet

**Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of Copies of CDs::  
Sequence Submission?:: None  
Computer Readable Form (CRF):: No  
Number of copies of CRF:: 0  
Title:: PHOTOSENSITIVE ADHESIVE  
COMPOSITION  
Attorney Docket Number:: 0502-1021  
Request for Early No  
Publication?::  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets::  
Small Entity?:: Yes  
Latin Name::  
Variety Denomination Name::  
Petition Included?:: No  
Petition Type::  
Licensed US Gov't Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent No  
Appl.?::

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: VINCENT  
Middle Name::  
Family Name:: GAUD  
Name Suffix::  
City of Residence:: VITRY SUR SEINE  
State or Province of Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 11, AVENUE DU COLONEL FABIEN  
Address::  
City of Mailing Address:: VITRY SUR SEINE  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: 94400

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: YVES  
Middle Name::  
Family Name:: GNANOU  
Name Suffix::  
City of Residence:: TALENCE  
State or Province of Residence::  
Country of Residence:: FRANCE  
Street of Mailing Address:: 86, RUE DU GENERAL DE CHANZY  
Address::  
City of Mailing Address:: TALENCE

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 33400

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: JEAN-PIERRE

Middle Name::

Family Name:: DESVERGNE

Name Suffix::

City of Residence:: LEOGNAN

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 3, RUE DU 8 MAI 1945

Address::

City of Mailing Address:: LEOGNAN

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 33850

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: FRANCIS

Middle Name::

Family Name:: DIERAS

Name Suffix::

City of Residence:: BORDEAUX

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 46, RUE DE RUAT

10/510112

DT04 Rec'd PCT/PTO 04 OCT 2004

Address::

City of Mailing Address:: BORDEAUX

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 33000

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: ALEXANDRINE

Middle Name::

Family Name:: ROUBIERE

Name Suffix::

City of Residence:: BORDEAUX

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 87, RUE HOCHE

Address::

City of Mailing Address:: BORDEAUX

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: 33200

#### **Correspondence Information**

Correspondence Customer 000466

Number::

#### **Representative Information**

Representative Customer	000466
Number::	

10/510112

DT04 Rec'd PCT/PTO 04 OCT 2004

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/FR03/01029	4/2/03

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	02/04179	4/3/02	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::